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CONFIRMATION NO. 9065

<b>SERIAL NUMBER</b> 10/759,315	<b>FILING DATE</b> 01/16/2004  <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1636	<b>ATTORNEY DOCKET NO.</b> GALA-08484
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**APPLICANTS**

Gregory T. Bleck, Cross Plains, WI; *PSL*  
 Robert D. Bremel, Hillpoint, WI;  
 Linda U. Miller, Lodi, WI;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/397,079 03/26/2003  
 which is a CIP of 09/897,511 06/29/2001 PAT 6,852,510  
 which claims benefit of 60/215,925 07/03/2000 *PSR*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

*NONE PSL*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 05/05/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>PSR</i> Verified and Acknowledged <i>PSR</i> Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> WI	<b>SHEETS</b> <b>DRAWING</b> 53	<b>TOTAL</b> <b>CLAIMS</b> 42	<b>INDEPENDENT</b> <b>CLAIMS</b> 2
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**ADDRESS**  
 J. Mitchell Jones  
 MEDLEN & CARROLL, LLP  
 Suite 350  
 101 Howard Street  
 San Francisco, CA  
 94105

**TITLE**  
 Production of host cells containing multiple integrating vectors by serial transduction

<b>FILING FEE</b>  <b>RECEIVED</b> 1296	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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